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Implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem: follow-up to the high-level review by the Commission on Narcotic Drugs, in view of the special session of the General Assembly on the world drug problem to be held in 2016

Paper submitted by the Vienna NGO Committee for Drugs**

The Secretary-General has received the following paper, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.7/2014/1.
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Summary Report from the Third VNGOC Informal Civil Society Hearing

This document offers a summary of some of the main points identified at the Hearing as requiring greater attention in the preparations for and during the 2016 United Nations General Assembly Special Session (UNGASS). The Hearing was held on 12 March in conjunction with UNODC and WHO. It was co-chaired by H.E. Ambassador Khaled Shamaa, Chair of the 57th Commission on Narcotic Drugs and Michel Perron, Chair of the VNGOC and was addressed by Mr. Yury Fedotov, Executive Director of UNODC.

The hearing was structured around two panels each addressing the following themes:

- How do International Drug Control Conventions accommodate a health-based approach?
- Using 2014 momentum to get 2016 right: what specific areas of policy or practice should be further explored leading up to UNGASS 2016?

While many specific examples were provided by panel and audience participants to these points, there were general points of convergence which emerged and that provide a guide to future discussions between NGOs and with Member States. These include:

1. **There was widespread support to build a commonly understood, broad understanding of what a health-based approach should be in the context of drug control**

   The International Drug Control Conventions (Conventions) have as their raison d'être the protection of the health and welfare of mankind. The WHO definition of "health" provides a valuable basis for our discussions, with "health" defined as a state of complete physical, mental, and social well-being and nor merely the absence of disease or infirmity. This definition can be applied, when using a health-based approach, to individuals, affected populations, and communities.

2. **There was general agreement on the need to build more effective system-wide coherence in implementing a health-based approach to drug control**

   Many different United Nations bodies are concerned with aspects of drug control — yet not all actions among these are entirely consistent with another. There is a need to minimize policy dissonance among these institutions given that the UNGASS 2016 meeting will be addressing the issue of drug policy in a United Nations wide perspective.

   Policy coherence needs to develop in a broader context, which takes into account the relationship between cultural, social, and economic issues, for instance, the impact of social inequality on illicit and harmful drug use.

3. **A health-based approach needs to be comprehensive and balanced**

   A health-based approach needs to include an entire continuum of evidenced based services including prevention, early detection and intervention, risk and harm

reduction, treatment, rehabilitation and social reintegration and an interlinkage between them. We need to advance understanding and knowledge of a combination of approaches, which intend to minimize harm and maximize public health and readjust within existing expenditure to resource what we know works.

Balance is not just between demand and supply reduction, but also to ensure the full continuum of care is available and resourced. For instance, we must overcome a situation in which 80 per cent of the world population has no access to essential medicines. This contradicts the very purpose of the Conventions.

4. The Conventions provide flexibility for the development and expansion of health-oriented initiatives

It was acknowledged there exists a significant amount of flexibility both in terms of interpretation and application of the Conventions by Member States. This flexibility can and in some cited instances, promotes innovative practice in prevention, care, treatment and social reintegration. Further the flexibility explicitly permits the use of alternatives to conviction or punishment. However it must be said that there can be significant and competing clashes between established United Nations priorities including, inter alia, Rights of the Child, Human Rights, and Development Priorities. That said, these interrelated commitments are impacted by the Conventions and must be considered and evaluated as such.

5. Member States can exercise choices on how they enact responses to drug-related issues

There was significant discussion about the impact of certain supply reduction approaches and it was noted that Member States have the choice to de-prioritize their actions in this area. Simply put, the Conventions and weight of evidenced based health-based programmes make for a compelling position on which to place greater emphasis. A de-escalation of enforcement actions on drug users is a real and viable option being exercised by many Member States. Further where there is an inevitable interaction between the health and criminal justice systems — Member States can strive to ensure that health is at the centre of both their responses. Stigmatization and discrimination can undermine effective health-based approaches and different choices could significantly impact on this situation.

6. We still lack robust data, drawing on the evidence of a wide range of stakeholders, which can inform effective policies and interventions

Given the importance of a health-based approach — there is a compelling argument to view the application of the drug control conventions as they relate to health outcomes. This is commonly done by the WHO with regard to other substances including legal ones such as alcohol and tobacco. To ensure appropriate alignment between actions and desired outcomes, there needs to be a much enhanced evidence and data specific base to guide the development of priorities. We need to build a better understanding of outcomes of the health-based approach to inform future drug policy.

7. Going forward

The VNGOC has provided NGO expertise to the development of drug policy and practice since the early 1980s. The VNGOC, drawing on our global membership, will bring further detail and clarity to these issues towards the 2016 UNGASS. To do so, we require your help to ensure that a truly global NGO voice can be heard. Please work with us to bring the voice of your NGOs to the table.